Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2009  Applicant claims small entity status. See 37 CFR 1.27					Complete if Known					
					Application Number 10/561,534					
					g Date	3/29/2007				
					Named Inventor	Niels Al	Niels Alexander Rozendaal			
					Examiner Name Gregory A. Wilson			on		
					Art Unit 3749					
TOTAL AMOUNT OF PAYMENT (\$) 1110.00				Attor	Attorney Docket 0470 - 053863					
METHOD OF PAY	MENT (check al	l that apply)						E Company		
Check 🗸	Credit Card	Money Orde	er N	one _	Other (please ide	entify):				
	nt Deposit Accou	_			Deposit Account					
					authorized to: (cl		apply)			
	rge fee(s) indicated					(s) indicated		ent for the	e filing fee	
Cha	rge any additional	fee(s) or unde	rpayments of	fee(s)		overpaymen				
und und warning: Information	er 37 CFR 1.16 and		adit card infor	notion cho						
information and authoriz	ation on PTO-2038.	come public. Cl	con card mior	HALION SHO	aia noi de incinaea oi	ı tais torm. Pr	ovide credit	card		
TEE CALCULATIO	N (All the fees b	elow are due	upon filing	or may	be subject to a su	rcharge.)				
1. BASIC FILING,										
FILING FEES SEARCH I <u>Small Entity</u> Smal										
Application Typ		Cee (S)	-	ee (\$)	Fee (\$)	Fee (\$)		Fees J	Paid (\$)	
Utility	330	82	540	270	220	110				
Design	220	110	100	50	140	70				
Plant	220	110	330	165	170	85				
Reissue	330	165	540	270	650	325				
Provisional	220	110	0	0	0	0				
2. EXCESS CLAIN	4 FEES							•	Small Entity	
Fee Description Fee (\$)									Fee (\$)	
Each claim over 20 (including Reissues) 52 Each independent claim over 3 (including Reissues) 220									26	
•	,	ling Reissues)	)					220	110	
Multiple dependent of		E-4 Ol-t-	- 1	(m)	T7 T0 * 1 (0)		-	390	195	
Total Claims	<u>- 20 or HP</u> =	0 or HP Extra Claims Fee		= জ	Fee Paid (\$)		<u>N</u>	Aultiple D Fee (\$)	ependent Claims	
HP = highest number	of total claims paid fo	or, if greater tha	n 20.					ree (a)	Fee Paid (\$)	
Indep. Claims	- 3 or HP	Extra Claim	s <u>Fee</u>	<u>(\$)</u>	Fee Paid (\$)					
		110	_ x	=						
HP = highest number and an APPLICATION	•	s paid for, if gre	ater than 3.							
If the specificati	on and drawings	exceed 100 sl	neets of pape	r (exclud	ing electronically	filed sequer	nce or com	outer listin	igs under	
37 CFR 1.52	2(e)), the applicati C. 41(a)(1)(G) and	ion size fee di	ıe is \$270 (\$	135 for s	mall entity) for ea	ch additiona	d 50 sheets	or fraction	n thereof.	
Total Sheets	Extra Shee			ach add	itional 50 or frac	tion thereo	f Fee	<b>(\$)</b>	Fee Paid (\$)	
- 10	00 =				d up to a whole num		x	=		
4. OTHER FEE(S)									Fees Paid (\$)	
Non-English S	-	\$130 fee (no	•	discount)	ı					
Other (e.g., late filing surcharge): Extension of Time Fee									\$1110.00	
SUBMITTED BY	1									
	Mal	1-1.		Re	egistration No.			December of the second		
Signature	10m	17-1	med		ttorney/Agent)	22,132	Telepho	ne 4	12-471-8815	
Name (Print/Type)	William H.	Logsdon 6			_		Date	Angn	st 18, 2009	